			•		Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									10/271,465					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OF	OTHER			
TO	OTAL CLAIMS		9	4				RATE	FEE	7	RATE	FEE		
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			:// minus 20=		•	0		XS 9≈		OR	XS18=			
INC	EPENDENT C	LAIMS	12 m	inus 3 =	•	9		X43=		OR	X86=			
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT	ESENT			-	+145=	 	OR	+290=	290		
* If the difference in column 1 is less than zero, enter "0" in column 2										OR	TOTAL	W/0		
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	J ~	OTHER	THAN		
1-1	سه ماه س	(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL			
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	• 14	Minus	- 10	1	- /		XS 9=		OR	X\$18=			
	Independent	- 12	Minus	/	7	-/	Ì	X43=		OR	X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=			
								TOTAL		OR	TOTAL			
(Oat 4)								ODIT. FEE		OR	ADDIT. FEE			
		(Column 1) CLAIMS		Colun Highi		(Column 3)					<u> </u>			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	**		· ·		XS 9=		OR	X\$18=	·		
	Independent	·	Minus	***		<u> -</u>		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE			
		(Column 1)		(Colum	n 2)	(Column 3)	^			•	D DII. 1 EE			
AMENDMENT C.		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=			
	Ind pendent	•	Minus	***		•	F	X43=			X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR				
• н	the entry in entry	nn 1 is less than the	antru in naha	na o whe '	n' in aal	uma 3	L	+145=		OR	+290=			
- 1	the Highest Nur	mber Previously Pai mber Previously Pai	d For IN THIS	SPACE IS	less than	20, enter "20."	A(TOTAL DOIT, FEE		OR ,	TOTAL DDIT. FEE			
		ber Previously Paid					toun	d in the app	ropriate box	in colu	μπn 1,			